PART B - FEE(S) TRANSMITTAL

JUN 1 4 2006	orm should be used for transpondence including the below or directed otherwise ns.		fee(s), to:	<u>Mail</u> r <u>Fax</u>	P.O. Box Alexandr (571)-273 CATION FEI of maintenan	1450 ia, Virg -2885 E (if require fees e address	ginia 22313-1450 uired). Blocks 1 through 5 will be mailed to the curren s; and/or (b) indicating a sep		
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John P. Shannon Merek, Blackmon 673 South Washin Alexandria, VA 22			I hereby cert	Ce ify that the Service the Ma the USI	rtificate of Mailing or Tran his Fee(s), Transmittal is bein with sufficient postage for fin il Stop ISSUE FEE address PTO (571) 273-2885, on the	g deposited with the United at class mail in an envelone			
06/15/2006 DEMMANU2 00000003 09647994					John	1.0	hannon	(Signature)	
01 FC:1501 1400.00 OP					// C	-12-	06	(Date)	
APPLICATION NO.	FILING DATE	FIRST NAMED INVEN			TOR		ATTORNEY DOCKET NO.	CONFIRMATION NO.	
09/647,994 12/05/2000 Jens Jorren Sorensen 36636-166651 7395 ITLE OF INVENTION: METHOD AND AN APPARATUS FOR TRANSFER OF PRESSURE AND/OR TENSILE LOAD									
APPLN, TYPE	SMALL ENTITY	ISSUE FEE P			IBLICATION I	EE	TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	NO	\$1400			\$0		\$1400	06/19/2006	
EXAM	IT CLASS-SUBCLASS			ss]				
STRIMBU,			049-072000		_				
Change of correspondence address or indication of "Fee Address" (37 FR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.				2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.					
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recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.									
(A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY) VKR Holding A/S Soeborg, DENMARK									
VKR Holding A/S Soeborg, DENMARK ease check the appropriate assignee category or categories (will not be printed on the patent): Individual Q Corporation or other private group entity Government									
Issue Fee Deblication Fee (No small entity discount permitted)				Payment of Fee(s): A check in the amount of the fee(s) is enclosed. Payment by credit card. Form PTO-2038 is attached. any deficiency for The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 50-0562 (enclose an extra copy of this form).					
a. Applicant claims Si	(from status indicated above MALL ENTITY status. See	e) 37 CFR 1.27.	b. Applic	ant is no	longer claim	ing SMA	LL ENTITY status. See 37 C	FR 1.27(g)(2).	
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Authorized Signature	Jan P. Fran	men			Date	6-	12-06		
Typed or printed name		nnon					vo. <u>29,276</u>	· · · · · · · · · · · · · · · · · · ·	
is collection of informatic	on is required by 37 CFR 1 3	11 The information	is required	to obtain	or retain a be	nefit by	the public which is to file (an	hy the USPTO to process)	

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